Under the Paperwork Reducti	ion Act of 199	5 no persons are required t	U.S. Pate o respond to a collecti	nt and Trac	lemark Office, U.S. D	DEPARTMENT OF COMMERCE ays a valid OMB control number		
Effect		Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nu	ımber	09/689,222			
FEE TR	ANS	MIIIAL	Filing Date		October 11, 20	00		
Fo	r FY 2	008	First Named In	nventor	Siddhartha Nag	g et.al		
			Examiner Nan	ne	Jeffrey R. Swea	aringen		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	2445				
TOTAL AMOUNT OF PAY	MENT (\$	0.00	Attorney Dock	et No.	PROM0005			
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
The state of the s								
Deposit Account Deposit Account Number: 50-4143 Deposit Account Name: Sadler, Breen, Morasch, & Colby ps For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1,16 and 1,17 Credit any overpayments								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038. FEE CALCULATION								
	DOLL AND	EVAMINATION FEE						
1. BASIC FILING, SEAF	FILING		ARCH FEES	FXAN	INATION FEES	3		
Application Type	Fee (\$)	Small Entity	Small Entity		Small Entity	Fees Paid (\$)		
Utility	310	Fee (\$) Fee 155 51	(\$) Fee (\$) 0 255	<u>Fee</u> 210		rees raiu (ş)		
Design	210	105 10		130				
Plant	210	105 10	- 20					
	310			160	00			
Reissue		155 51		620				
Provisional	210	105	0 0	0	0			
2. EXCESS CLAIM FEI Fee Description	ES				Fee (\$)	Small Entity Fee (\$)		
Each claim over 20 (50	25				
Each independent cla			210	105				
Multiple dependent of			370	185				
Total Claims 0 - 20 or HP =	Extra Clai		Fee Paid (\$) 0.00			Dependent Claims		
HP = highest number of tota			7.00		Fee (\$)	Fee Paid (\$)		
Indep. Claims	Extra Clai		ee Paid (\$)		0.00	0.00		
0 3 or HP = 0 _ x 220.00 = 0.00								
HP = highest number of inde		s paid for, if greater than 3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
), the application size						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (50 = 100) = (50 = 100) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700) = (700)								
4. OTHER FEE(S)		130 fee (no small enti				Fees Paid (\$)		
Other (e.g., late filin		*	ty discount)					
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SUBMITTED BY		
Signature	/Allan T. Sponseller, Reg. #38,318/ Registration No. 38318 (Attorney/Agent)	Telephone 509-755-7262
Name (Print/Type)	Allan T. Sponseller	Date 08/25/2009

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.